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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>allowance</i> Acknowledged <i>11/9/05</i> Examiner's Signature Initials		STATE OR COUNTRY NY	SHEETS DRAWING 3	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
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